# ARTHROPLASTY CLINICAL OUTCOMES REGISTRY NSW (ACORN)

DATA DICTIONARY, VERSION 1

FINAL DRAFT, 16 MAY 2013

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In the development of this data dictionary the Arthroplasty Clinical Outcomes Registry NSW (ACORN) Steering Committee acknowledges the AIHW's Metadata Online Registry (http://meteor.aihw.gov.au/content/index.phtml/itemId/181162) and the HESonline PROMs Data Dictionary (http://www.hscic.gov.uk/hes).







#### **Section 1: Demographic Information**

**ACORN Unique Record Identifier** 

Q1 Data Collection Commenced

Q1 Data Collector

**Hospital Name** 

**Hospital State** 

Person Last Name

Person Given Name

Person Middle Initial

Medical Record Number

Person Address

Person Address Suburb

Person Address Postcode

Person Telephone

Person Date of Birth

Person Age

Person Sex

Spoken Language

Preferred Language

**Funding Source** 

Person School Education

Person Non School Education

Other Contact

Other Contact Telephone

**General Practitioner** 

General Practitioner Telephone

DF_00_ACORN Uniq	ue Record Identifier
Field Name	ID_number
Field Definition	Unique registry identifier generated by the Registry software
Justification	Maintains a unique identifier for each record and allows reversible de- identification of registry participants
Mandatory	Auto
Collection Method	Sequential, automatic generation on registration of each new participant
Data Type	Alpha-numeric
Data Format	ANNN-NNNNNN
Maximum Size	10
Comments	This number is unique between participating hospitals. The same patient admitted to the same facility for a subsequent joint replacement will generate a new number for each independent event.
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q1 Data Collection Commenced	
Field Name	q1_data_coll_comm







Field Definition	The date the initial data collection commenced.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8
Comments	Will usually coincide with the day the first questionnaires are completed.
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q1_Data Collector	
Field Name	q1_data_coll
Field Definition	The initials of the person commencing data collection at the hospital.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Text
Data Format	XX
Maximum Size	2
Comments	
METeOR Identifier	
Field Coding	
Availability	

DF_00_Hospital Name	
Field Name	hosp_name
Field Definition	Name of the hospital the person will be admitted to for their joint replacement surgery.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Text String
Data Format	XXX[X(97)]
Maximum Size	100
Comments	
METeOR Identifier	407430
Field Coding	
Availability	

#### DF\_00\_Hospital State







Field Name	hosp_state
Field Definition	An identifier of the Australian state or territory where an organisation or agency can be located, as represented by a code.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	289083
Field Coding	1 = New South Wales 2 = Victoria 3 = Queensland 4 = South Australia 5 = Western Australia 6 = Tasmania 7 = Northern Territory 8 = Australian Capital Territory 9 = Other Territories
Availability	

DF_00_Person Last Name	
Field Name	pers_last_name
Field Definition	The part of a name a person has in common with other members of his/her family, as distinguished from their given name
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Text string
Data Format	X[X(39)]
Maximum Size	40
Comments	A person may only have one reported last name. It is the last name stated on the birth certificate.
METeOR Identifier	286953
Field Coding	
Unit of Measure	

DF_00_Person Given Name	
Field Name	pers_given_name
Field Definition	The person's identifying name within the family group or by which the person is socially identified, as represented by text.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Text string
Data Format	[X(40)]
Maximum Size	40







Comments	This is the name that formally identifies the individual within the family group and is to be recorded as the 'actual' name, as printed on an identification card such as the Birth Certificate, Medicare Card or Drivers License, not the 'preferred' name.
METeOR Identifier	287035
Field Coding	
Unit of Measure	

DF_00_Person Middle Initial	
Field Name	pers_mid_init
Field Definition	The person's first initial of their middle name.
Justification	
Mandatory	Conditional
Collection	
Data Type	Text
Data Format	X
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	
Unit of Measure	

DF_00_Medical Record Number	
Field Name	mrn
Field Definition	The number allocated by the health care facility to a person so as to identify their admission.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	N(9)
Maximum Size	9
Comments	
METeOR Identifier	
Field Coding	
Unit of Measure	

DF_00_Person Address	
Field Name	pers_address
Field Definition	A composite of one or more standard address components that describes a low level of geographical/physical description of a location, as represented by text.
Justification	
Mandatory	Mandatory
Collection	







Data Type	Text string
Data Format	[X(180)]
Maximum Size	180
Comments	For example, includes building name, house number, street name.
METeOR Identifier	286620
Field Coding	
Unit of Measure	

DF_00_Person Address Suburb	
Field Name	pers_add_sub
Field Definition	The full name of the locality contained within the address to describe the location at which a person resides.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Text string
Data Format	{A(50)]
Maximum Size	50
Comments	The suburb, town, city or commonly used location that is included as part the person's address
METeOR Identifier	287326
Field Coding	
Unit of Measure	

DF_00_Person Address Postcode	
Field Name	pers_add_pcode
Field Definition	The numeric descriptor for a postal delivery area for an address.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	{NNNN}
Maximum Size	4
Comments	
METeOR Identifier	429894
Field Coding	
Unit of Measure	

DF_00_Person Telephone	
Field Name	pers_teleph
Field Definition	The person's contact telephone number, as represented by text.
Justification	
Mandatory	Mandatory
Collection	







Data Type	Text string
Data Format	[X(40)]
Maximum Size	40
Comments	More than one number can be recorded. Record the prefix plus telephone number. The default should be the local prefix with an ability to overtype with a different prefix.  For example, 08 8226 6000 or 0417 123456.
METeOR Identifier	270266
Field Coding	
Unit of Measure	

DF_00_Person Date of Birth	
Field Name	pers_dob
Field Definition	The date of birth of the person.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8
Comments	
METeOR Identifier	287007
Field Coding	
Unit of Measure	

DF_00_Person Age	
Field Name	pers_age
Field Definition	The age of the person in completed years at a specific point in time.
Justification	Age is a core element in a variety of demographic and riskadjustment statistics.
Mandatory	Mandatory
Collection	Automatic calculation of age by the Registry software on registration of each participant
Data Type	Number
Data Format	N[NN]
Maximum Size	3
Comments	
METeOR Identifier	303794
Field Coding	999 = Not Stated/Unknown
Unit of Measure	

DF_00_Person Sex	
Field Name	pers_sex
Field Definition	The biological distinction between male and female, as represented by a code.
	by a code.







Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	A coding of 9 is not to be used when collecting the data; it is for administrative use when it has not been collected and submitted.
METeOR Identifier	287316
Field Coding	1 = Male 2 = Female 3 = Intersex or indeterminate 9 = Not Stated/Unknown
Unit of Measure	

DF_00_ Spoken Language	
Field Name	spoken_lang
Field Definition	Does the person prefer to communicate in English?
Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not stated
Unit of Measure	

DF_00_ Preferred Language	
Field Name	pref_lang
Field Definition	The language preferred by the person for communication.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	NN{NN}
Maximum Size	4
Comments	
METeOR Identifier	460123
Field Coding	Use the Australian Standard of Classification of Languages 2011.
Unit of Measure	







DF_00_ Funding Source	
Field Name	fund_source
Field Definition	The source of funds for an admitted patient episode or non-admitted patient service event, as represented by a code.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	NN
Maximum Size	2
Comments	
METeOR Identifier	
Field Coding	01 = Public patient 02 = Private health insurance 03 = Self funded 04 = Third party 05 = Workers' compensation 06 = Other compensation 07 = DVA 88 = Other 99 = Not stated/Unknown
Unit of Measure	

DE 00 Damas Calasal	Education
DF_00_Person School	Education
Field Name	pers_sch_edu
Field Definition	The highest level of schooling that a person has completed, as represented by a code.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Highest level of schooling includes study at a secondary education level, which might, for example, be undertaken at a Technical and Further Education (TAFE) institution (ABS, 2002). Record the code for the highest year of schooling completed, regardless of the institution or location where that study took place. If a year of schooling had been commenced but not completed, the code for the year below should be used.
METeOR Identifier	
Field Coding	1 = Year 12 2 = Year 11 3 = Year 10 4 = Year 9 5 = Year 8 or below 6 = No schooling 9 = Not stated/Unknown
Unit of Measure	







DF_00_Person Non Sch	nool Education
Field Name	pers_non_sch_edu
Field Definition	The highest non-school qualification attained by a person, as represented by a code.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Non-school qualifications are awarded for educational attainments other than those of pre-primary, primary or secondary education. They include qualifications at the Postgraduate Degree level, Master Degree level, Graduate Diploma and Graduate Certificate level, Bachelor Degree level, Advanced Diploma and Diploma level, and Certificates I, II, III and IV levels.
METeOR Identifier	
Field Coding	<ul> <li>1 = Trade certificate (Certificate I-IV)</li> <li>2 = Advanced Diploma and Diploma</li> <li>3 = Bachelor Degree</li> <li>4 = Graduate Diploma and Graduate Certificate</li> <li>5 = Postgraduate Degree</li> <li>9 = Not stated/Unknown</li> </ul>
Unit of Measure	

DF_00_Other Contact	
DI _00_Other Contact	
Field Name	oth_cont
Field Definition	Name of other person who gives permission to be contacted for follow up of person undergoing joint replacement.
Justification	
Mandatory	Optional
Collection	
Data Type	Text string
Data Format	[X(180)]
Maximum Size	180
Comments	
METeOR Identifier	
Field Coding	
Unit of Measure	

DF_00_Other Contact Telephone	
Field Name	oth_cont_teleph
Field Definition	The contact telephone number of the person's other contact.
Justification	
Mandatory	Optional
Collection	
Data Type	Text string
Data Format	[X(40)]







Maximum Size	40
Comments	Record the prefix plus telephone number. The default should be the local prefix with an ability to overtype with a different prefix. For example, 08 8226 6000 or 0417 123456.
METeOR Identifier	
Field Coding	
Unit of Measure	

DF_00_General Practitioner	
Field Name	gp
Field Definition	The name of the person's usual family doctor.
Justification	
Mandatory	Optional
Collection	
Data Type	Text string
Data Format	[X(180)]
Maximum Size	180
Comments	
METeOR Identifier	
Field Coding	
Unit of Measure	

DF_00_General Practition	oner Telephone
Field Name	gp_teleph
Field Definition	The contact telephone number of the person's usual family doctor.
Justification	
Mandatory	Optional
Collection	
Data Type	Text string
Data Format	[X(40)]
Maximum Size	40
Comments	Record the prefix plus telephone number. The default should be the local prefix with an ability to overtype with a different prefix. For example, 08 8226 6000 or 0417 123456.
METeOR Identifier	
Field Coding	
Unit of Measure	







#### **Section 2: Baseline Clinical Status**

**Baseline Clinical Status Determined** 

Q1 Height

Q1 Weight

Q1 Body Mass Index

Primary Joint Replacement Procedure

Primary Joint Replacement Side

Primary Joint Replacement Diagnosis

Primary Joint Replacement Diagnosis Other

Revision Joint Replacement Procedure

Revision Joint Replacement Side

Revision Joint Replacement Reason

Revision Joint Replacement Reason Other

Knee Replacement Previous

Knee Replacement Previous Side

Hip Replacement Previous

Hip Replacement Previous Side

Q1 Comorbid Condition Heart Disease

Q1 Heart Disease Medication

Q1 Comorbid Condition High Blood Pressure

Q1 High Blood Pressure Medication

Q1 Comorbid Condition Lung Disease

Q1 Lung Disease Medication

Q1 Comorbid Condition Diabetes

Q1 Diabetes Medication

Q1 Comorbid Condition Stomach Disease

Q1 Stomach Disease Medication

Q1 Comorbid Condition Liver Disease

Q1 Liver Disease Medications

Q1 Comorbid Condition Renal Failure

Q1 Renal Failure Medication

Q1 Comorbid Condition Neurological Condition

Q1 Neurological Condition Medication

Q1 Comorbid Condition Depression Anxiety

Q1 Depression Anxiety Medication

Q1 Comorbid Condition Low Back Pain

Q1 Comorbid Condition Lower Limb Arthritis

DF_00_Baseline Clinical Status Determined	
Field Name	base_clin_status
Field Definition	Date that the preadmission clinical status was determined.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8







Comments	Baseline clinical status must be completed on the day it is commenced.
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q1 Height	
Field Name	q1_hgt
Field Definition	The height of a person measured in centimetres
Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	NN[N].N
Maximum Size	4
Comments	This is measured height not self-reported height.
METeOR Identifier	270361
Field Coding	999.9 = Not measured
Unit of Measure	

DF_00_Q1 Weight	
Field Name	q1_wgt
Field Definition	The weight (body mass) of a person measured in kilograms.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	N[NN].N
Maximum Size	4
Comments	A continuous variable measured to the nearest 0.1kg. Weight is measured not self-reported.
METeOR Identifier	270208
Field Coding	999.9 = Not measured
Unit of Measure	

DF_00_Q1 Body Mass Index	
Field Name	q1_bmi
Field Definition	A measure of an adult's weight (body mass) relative to height used to assess the extent of weight deficit or excess where height and weight have been measured.
Justification	
Mandatory	Mandatory
Collection	
Data Type	Number
Data Format	NN[N].N[N]







Maximum Size	5
Comments	Body mass index is a continuous variable and is calculated using the formula: BMI = weight (kg) divided by height (m) squared
METeOR Identifier	270084
Field Coding	888.8 = Unknown 999.9 = Not measured
Unit of Measure	1101.11.00001.00

DF_00_Primary Joint	Replacement Procedure
Field Name	pjr_procedure
Field Definition	Describes the procedure responsible for the admitted episode.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Primary Total Hip Replacement 2 = Primary Total Knee Replacement 3 = Primary Unicompartment Knee Replacement 4 = None 9 = Unknown/Not stated
Availability	

DF_00_Primary Joint Replacement Side	
Field Name	pjr_side
Field Definition	Describes the side of the body that is to be operated on.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Right 2 = Left 9 = Unknown/Not stated
Availability	

DF_00_Primary Joint Replacement Diagnosis	
Field Name	pjr_diagnosis
Field Definition	Describes the reason for the surgery. Only one diagnosis can be chosen.







Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	NN
Maximum Size	2
Comments	Choice of "other" initiates a text box for specification of the reason for revision.
METeOR Identifier	
Field Coding	01 = Osteoarthritis 02 = Rheumatoid arthritis 03 = DDH (Developmental Dysplasia of the Hip) 04 = Other inflammatory arthritis 05 = Osteonecrosis/AVN (avascular necrosis) 06 = Tumour 88 = Other 99 = Unknown/Not stated
Availability	

DF_00_ Primary Joint Replacement Diagnosis Other	
Field Name	pjr_diag_other
Field Definition	Description of the diagnosis for surgery if not one of the listed reasons.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Text string
Data Format	[X(40)]
Maximum Size	40
Comments	Conditional on answer to Primary Joint Replacement Diagnosis.
METeOR Identifier	
Field Coding	
Availability	

DF_00_Revision Join	t Replacement Procedure
Field Name	rjr_procedure
Field Definition	Specifies the joint replacement being revised.
Justification	
Mandatory	Optional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Revision Total Hip Replacement
	2 = Revision Total Knee Replacement
	3 = Revision Unicompartment Replacement







	9 = Unknown/Not stated
Availability	

DF_00_Revision Join	t Replacement Side
Field Name	rjr_side
Field Definition	Specifies the side of the joint replacement being revised.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Right
	2 = Left
	9 = Unknown/Not stated
Availability	

DF_00_Revision Join	t Replacement Reason
Field Name	rjr_reason
Field Definition	Describes the reason for revision of the joint replacement.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	NN
Maximum Size	2
Comments	Choice of "other" initiates a text box for specification of the reason for revision.
METeOR Identifier	
Field Coding	01 = Loosening 02 = Lysis 03 = Dislocation 04 = Implant breakage 05 = Infection 06 = Fracture 88 = Other 99 = Unknown/Not stated
Availability	

DF_00_Revision Joint Replacement Reason Other	
Field Name	rjr_reason_other
Field Definition	Description of the diagnosis for surgery if not one of the listed reasons.
Justification	
Mandatory	Conditional







Collection Method	
Data Type	Text string
Data Format	[X(40)]
Maximum Size	40
Comments	
METeOR Identifier	
Field Coding	
Availability	

DF_00_Knee Replacement Previous	
Field Name	kr_prev
Field Definition	Have you previously had one of your knees replaced?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Knee Replacement Previous Side	
Field Name	kr_prev_side
Field Definition	Which knee was previously replaced?
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Right 2 = Left 3 = Both 9 = Unknown/Not Stated
Availability	

DF_00_Hip Replacement Previous	
Field Name	hr_prev
Field Definition	Have you previously had one of your hips replaced?







Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes 2 = No 9 = Unknown/Not Stated
Availability	

DF_00_Hip Replacement Previous Side	
Field Name	hr_prev_side
Field Definition	Which hip was previously replaced?
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Right 2 = Left 3 = Both 9 = Unknown/Not Stated
Availability	3 - OHNIOWIMOL Stated

DF_00_Q1 Comorbid Condition Heart Disease	
Field Name	q1_cc_hd
Field Definition	Have you ever been told by a doctor that you have heart disease?
Justification	Measure of morbidity for risk adjusting reported outcomes.
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	







DF_00_Q1 Heart Dise	ease Medication
Field Name	q1_cc_hd_meds
Field Definition	Do you take daily medication for your heart disease?
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Comorbid Condition High Blood Pressure	
Field Name	q1_cc_hbp
Field Definition	Have you ever been told by a doctor that you have high blood pressure?
Justification	Measure of morbidity for risk adjusting reported outcomes.
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes 2 = No 9 = Unknown/Not Stated
Availability	

DF_00_Q1 High Blood Pressure Medication	
Field Name	q1_cc_hbp_meds
Field Definition	Do you take daily medication for your high blood pressure?
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes







	2 = No 9 = Unknown/Not Stated
Availability	

DF_00_Q1 Comorbid Condition Lung Disease	
Field Name	q1_cc_lud
Field Definition	Have you ever been told by a doctor that you have a lung disease?
Justification	Measure of morbidity for risk adjusting reported outcomes.
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Lung Dise	ase Medication
Field Name	q1_cc_lud_meds
Field Definition	Do you take daily medication for your lung disease?
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Comorbid Condition Diabetes	
Field Name	q1_cc_diab
Field Definition	Have you ever been told by a doctor that you have diabetes?
Justification	Measure of morbidity for risk adjusting reported outcomes.
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1







Comments	
METeOR Identifier	
Field Coding	1 = Yes 2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Diabetes Medication	
Field Name	q1_cc_diab_meds
Field Definition	Do you take daily medication for your diabetes?
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DE 00 O1 Comorbid	Condition Stomach Disease
Field Name	q1_cc_sd
Field Definition	Have you ever been told by a doctor that you have a stomach disease or ulcer?
Justification	Measure of morbidity for risk adjusting reported outcomes.
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Stomach Disease Medication	
Field Name	q1_cc_sd_meds
Field Definition	Do you take daily medication for your stomach disease or ulcer?
Justification	
Mandatory	Conditional
Collection Method	







Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes 2 = No 9 = Unknown/Not Stated
Availability	

DF_00_Q1 Comorbid Condition Liver Disease	
Field Name	q1_cc_livd
Field Definition	Have you ever been told by a doctor that you have liver disease?
Justification	Measure of morbidity for risk adjusting reported outcomes.
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Liver Dise	ase Medication
Field Name	q1_cc_livd_meds
Field Definition	Do you take daily medication for your liver disease?
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Comorbid Condition Renal Failure	
Field Name	q1_cc_rf
Field Definition	Have you ever been told by a doctor that you have renal failure?







Justification	Measure of morbidity for risk adjusting reported outcomes.
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Renal Fail	DF_00_Q1 Renal Failure Medication	
Field Name	q1_cc_rf_meds	
Field Definition	Do you take daily medication or have regular dialysis for your renal failure?	
Justification		
Mandatory	Conditional	
Collection Method		
Data Type	Number	
Data Format	N	
Maximum Size	1	
Comments		
METeOR Identifier		
Field Coding	1 = Yes	
	2 = No	
	9 = Unknown/Not Stated	
Availability		

DF_00_Q1 Comorbid	Condition Neurological Condition
Field Name	q1_cc_nc
Field Definition	Have you ever been told by a doctor that you have a neurological condition or disease?
Justification	Measure of morbidity for risk adjusting reported outcomes.
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	







DF_00_Q1 Neurologi	DF_00_Q1 Neurological Condition Medication	
Field Name	q1_cc_nc_meds	
Field Definition	Do you take daily medication for your neurological condition or disease?	
Justification		
Mandatory	Conditional	
Collection Method		
Data Type	Number	
Data Format	N	
Maximum Size	1	
Comments		
METeOR Identifier		
Field Coding	1 = Yes	
	2 = No	
	9 = Unknown/Not Stated	
Availability		

DF_00_Q1 Comorbid	Condition Depression Anxiety
Field Name	q1_cc_dep
Field Definition	Have you ever been told by a doctor that you have depression and/or anxiety?
Justification	Measure of morbidity for risk adjusting reported outcomes.
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Depression	on Anxiety Medication
Field Name	q1_cc_dep_meds
Field Definition	Do you take daily medication for your depression/anxiety?
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	







Field Coding	1 = Yes 2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Comorbid Condition Low Back Pain	
Field Name	q1_cc_lbp
Field Definition	Do you experience low back pain that interferes with your mobility and/or daily function?
Justification	Measure of morbidity for risk adjusting reported outcomes.
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	

DF_00_Q1 Comorbid	Condition Other Lower Limb Arthritis
Field Name	q1_cc_ll_arthritis
Field Definition	Do you have other lower limb arthritis that interferes with your mobility and/or daily function?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not Stated
Availability	







#### Section 3: Baseline Functional Status

- Q1 Survey Date
- Q1 EQ5D Mobility
- Q1 EQ5D Personal Care
- Q1 EQ5D Usual Activities
- Q1 EQ5D Pain Discomfort
- Q1 EQ5D Anxiety Depression
- Q1 EQ5D VAS
- Q1 EQ5D Profile
- Q1 EQ5D Index
- Q1 Oxford Hip Score Pain
- Q1 Oxford Hip Score Washing
- Q1 Oxford Hip Score Transport
- Q1 Oxford Hip Score Dressing
- Q1 Oxford Hip Score Shopping
- Q1 Oxford Hip Score Walking
- Q1 Oxford Hip Score Stairs
- Q1 Oxford Hip Score Standing
- Q1 Oxford Hip Score Limping
- Q1 Oxford Hip Score Sudden Pain
- Q1 Oxford Hip Score Work
- Q1 Oxford Hip Score Night Pain
- Q1 Oxford Hip Score Total
- Q1 Oxford Knee Score Pain
- Q1 Oxford Knee Score Washing
- Q1 Oxford Knee Score Transport
- Q1 Oxford Knee Score Walking
- Q1 Oxford Knee Score Standing
- Q1 Oxford Knee Score Limping
- Q1 Oxford Knee Score Kneeling
- Q1 Oxford Knee Score Night Pain
- Q1 Oxford Knee Score Work
- Q1 Oxford Knee Score Confidence
- Q1 Oxford Knee Score Shopping
- Q1 Oxford Knee Score Stairs
- Q1 Oxford Knee Score Total

DF_00_Q1 Survey Date	
Field Name	q1_survey_date
Field Definition	Date that the preadmission surveys were administered and completed.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8







Comments	Both surveys (Oxford Score and EQ 5D) must be completed on the day they are commenced.
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q1 EQ5D Mol	bility
Field Name	q1_eq5d_mobility
Field Definition	Rates the person's perceived mobility. Person indicates which of five statements best describes their mobility today.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = I have no problems with walking around 2 = I have slight problems with walking around 3 = I have moderate problems with walking around 4 = I have severe problems with walking around 5 = I am unable to walk around 9 = Unknown/Not stated
Availability	

DF_00_Q1 EQ5D Per	rsonal Care
Field Name	q1_eq5d_personal_care
Field Definition	Rates the person's perceived ability to perform their personal care activities. Person indicates which of five statements best describes their ability to care for themselves today.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = I have no problems with washing or dressing myself 2 = I have slight problems with washing or dressing myself 3 = I have moderate problems with washing or dressing myself 4 = I have severe problems with washing or dressing myself 5 = I am unable to wash or dress myself 9 = Unknown/Not stated
Availability	







DF_00_Q1 EQ5D Us	ual Activities
Field Name	q1_eq5d_usual_activities
Field Definition	Rates the person's perceived ability to perform their usual activities.  Person indicates which of five statements best describes their ability to perform their usual activities today.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Usual activities include work, study, house work, gardening, family time or other leisure activities.
METeOR Identifier	
Field Coding	<ul> <li>1 = I have no problems doing my usual activities</li> <li>2 = I have slight problems doing my usual activities</li> <li>3 = I have moderate problems doing my usual activities</li> <li>4 = I have severe problems doing my usual activities</li> <li>5 = I am unable to do my usual activities</li> <li>9 = Unknown/Not stated</li> </ul>
Availability	

DF_00_Q1 EQ5D Pai	n Discomfort
Field Name	q1_eq5d_discomfort
Field Definition	Rates the person's perceived pain or discomfort. Person indicates which of five statements best describes their pain or discomfort today.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = I have no pain or discomfort 2 = I have slight pain or discomfort 3 = I have moderate pain or discomfort 4 = I have severe pain or discomfort 5 = I have extreme pain or discomfort 9 = Unknown/Not stated
Availability	

DF_00_Q1 EQ5D Anxiety Depression	
Field Name	q1_eq5d_anxiety
Field Definition	Rates the person's perceived level of anxiety or depression. Person indicates which of five statements best describes their anxiety/depression today.
Justification	
Mandatory	Mandatory







Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = I am not anxious or depressed
	2 = I am slightly anxious or depressed
	3 = I am moderately anxious or depressed
	4 = I am severely anxious or depressed
	5 = I am extremely anxious or depressed
	9 = Unknown/Not stated
Availability	

DF_00_Q1 EQ5D VAS	
Field Name	q1_eq5d_vas
Field Definition	Rates the person's perceived health on the day of completing the questionnaire. The person answers in response to the question: we would like to know how good or bad your health is TODAY; when 0 is worst health and 100 is best health what score would you give your health TODAY?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	[NNN]
Maximum Size	3
Comments	The VAS (Visual Analogue Scale) is rated from 0 – 100 with 0 being worst health today and 100 being best health today.
METeOR Identifier	
Field Coding	0 to 100 = person's self-rated health or well-being 999 = Unknown/Not Stated
Availability	

DF_00_Q1 EQ5D Pro	file
Field Name	q1_eq5d_profile
Field Definition	EQ 5D profile lists the responses to the five questions as a five-digit number.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N(5)
Maximum Size	5
Comments	For example, 11111 means the person chose option 1 for each question; 43434 means the person chose option 4 for questions 1, 3, and 5, and option 3 for questions 2 and 4.
METeOR Identifier	







Field Coding	
Availability	

DF_00_Q1 EQ5D Inde	ex
Field Name	q1_eq5d_index
Field Definition	EQ 5D index score on questionnaire two.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N.NNN
Maximum Size	5
Comments	The index score for the EQ 5D 5L is derived from the crosswalk value sets provided by EuroQol. A health state of 11111 is given an index score of 1.000.
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q1 Oxford Hi	p Score Pain
Field Name	q1_oxf_hs_pain
Field Definition	During the past 4 weeks, how would you describe the pain you usually have from your hip?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Severe 1 = Moderate 2 = Mild 3 = Very mild 4 = None 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Hip Score Washing	
Field Name	q1_oxf_hs_washing
Field Definition	During the past 4 weeks, have you had any trouble with washing and drying yourself all over because of your hip?
Justification	
Mandatory	Mandatory
Collection Method	







Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Impossible to do 1 = Extreme difficulty 2 = Moderate trouble 3 = Very little trouble 4 = No trouble at all 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Hip Score Transport	
Field Name	q1_oxf_ hs_transport
Field Definition	During the past 4 weeks, have you had any trouble getting in and out of a car or using public transport because of your hip? (whichever you tend to use)
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Impossible to do 1 = Extreme difficulty 2 = Moderate trouble 3 = Very little trouble 4 = No trouble at all 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Hi	p Score Dressing
Field Name	q1_oxf_ hs_dressing
Field Definition	During the past 4 weeks, have you been able to put on a pair of socks, stockings, or tights?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty







	2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily
	9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Hi	p Score Shopping
Field Name	q1_oxf_ hs_shopping
Field Definition	During the past 4 weeks, could you do the household shopping on your own?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Hi	p Score Walking
Field Name	q1_oxf_ hs_walking
Field Definition	During the past 4 weeks, for how long have you been able to walk before pain from your hip becomes <b>severe</b> ? (with or without a stick)
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Not at all/severe on walking 1 = Around the house only 2 = 5 to 15 minutes 3 = 16 to 30 minutes 4 = No pain/more than 30 minutes 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Hip Score Stairs		
Field Name	q1_oxf_ hs_stairs	







Field Definition	During the past 4 weeks, have you been able to climb a flight of stairs?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Hi	p Score Standing
Field Name	q1_oxf_ hs_standing
Field Definition	During the past 4 weeks, after a meal (seated at a table), how painful has it been for you to stand up from a chair because of your hip?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Unbearable 1 = Very painful 2 = Moderately painful 3 = Slightly painful 4 = Not at all painful 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Hip Score Limping	
Field Name	q1_oxf_ hs_limping
Field Definition	During the past 4 weeks, have you been limping when walking because of your hip?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1







Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Rarely/never 1 = Sometimes or just at first 2 = Often, not just at first 3 = Sometimes or just at first 4 = Rarely/never
Availability	9 = Unknown/Not stated

DF_00_Q1 Oxford Hi	p Score Sudden Pain
Field Name	q1_oxf_ hs_sudden_pain
Field Definition	During the past 4 weeks, have you had any sudden, severe pain – "shooting", "stabbing", or "spasms" – from the affected hip?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Every day 1 = Most days 2 = Some days 3 = Only 1 or 2 days 4 = No days 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Hi	p Score Work
Field Name	q1_oxf_ hs_work
Field Definition	During the past 4 weeks, how much has <u>pain from your hip</u> interfered with your usual work (including housework)?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Totally 1 = Greatly 2 = Moderately 3 = A little bit 4 = Not at all 9 = Unknown/Not stated
Availability	







DF_00_Q1 Oxford Hi	p Score Night Pain
Field Name	q1_oxf_ hs_night_pain
Field Definition	During the past 4 weeks, have you been troubled by pain from your hip in bed at night?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Every night 1 = Most nights 2 = Some nights 3 = Only 1 or 2 nights 4 = No nights 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Hip	o Score Total
Field Name	q1_oxf_ hs_total
Field Definition	Summed total of the responses to the twelve Oxford Hip questions.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Each of the Oxford Hip Score questions has five possible responses with 0-4 points attributed to each answer. Adding the relevant number of points for each response provided derives the total score. The maximum number of points is 48 (best outcome) and the minimum is 0 (worst outcome).
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q1 Oxford Knee Score Pain	
Field Name	q1_oxf_ks_pain
Field Definition	During the past 4 weeks, how would you describe the pain you usually have from your knee?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number







Data Format	N
Maximum Size	1
Comments	Question relates to the knee that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Severe 1 = Moderate 2 = Mild 3 = Very mild 4 = None 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Knee Score Washing		
Field Name	q1_oxf_ ks_washing	
Field Definition	During the past 4 weeks, have you had any trouble with washing and drying yourself all over because of your knee?	
Justification		
Mandatory	Mandatory	
Collection Method		
Data Type	Number	
Data Format	N	
Maximum Size	1	
Comments	Question relates to the knee that is going to be replaced.	
METeOR Identifier		
Field Coding	0 = Impossible to do 1 = Extreme difficulty 2 = Moderate trouble 3 = Very little trouble 4 = No trouble at all 9 = Unknown/Not stated	
Availability		

DF_00_Q1 Oxford Knee Score Transport		
DF_UU_Q1 Oxford Kr	nee Score Transport	
Field Name	q1_oxf_ ks_transport	
Field Definition	During the past 4 weeks, have you had any trouble getting in and out of a car or using public transport because of your knee? (whichever you tend to use)	
Justification		
Mandatory	Mandatory	
Collection Method		
Data Type	Number	
Data Format	N	
Maximum Size	1	
Comments	Question relates to the knee that is going to be replaced.	
METeOR Identifier		
Field Coding	0 = Impossible to do 1 = Extreme difficulty 2 = Moderate trouble 3 = Very little trouble	







	4 = No trouble at all 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Kr	nee Score Walking
Field Name	q1_oxf_ ks_walking
Field Definition	During the past 4 weeks, for how long have you been able to walk before pain from your knee becomes <b>severe</b> ? (with or without a stick)
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Not at all/severe on walking 1 = Around the house only 2 = 5 to 15 minutes 3 = 16 to 30 minutes 4 = No pain/more than 30 minutes 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Kr	nee Score Standing
Field Name	q1_oxf_ ks_standing
Field Definition	During the past 4 weeks, after a meal (seated at a table), how painful has it been for you to stand up from a chair because of your knee?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Unbearable 1 = Very painful 2 = Moderately painful 3 = Slightly painful 4 = Not at all painful 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Knee Score Limping	
Field Name	q1_oxf_ ks_limping
Field Definition	During the past 4 weeks, have you been limping when walking
	because of your knee?







Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Rarely/never 1 = Sometimes or just at first 2 = Often, not just at first 3 = Sometimes or just at first 4 = Rarely/never 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Kr	DF_00_Q1 Oxford Knee Score Kneeling	
Field Name	q1_oxf_ ks_Kneeling	
Field Definition	During the past 4 weeks, could you kneel down and get up again afterwards?	
Justification		
Mandatory	Mandatory	
Collection Method		
Data Type	Number	
Data Format	N	
Maximum Size	1	
Comments	Question relates to the knee that is going to be replaced.	
METeOR Identifier		
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily 9 = Unknown/Not stated	
Availability		

DF_00_Q1 Oxford Knee Score Night Pain	
Field Name	q1_oxf_ ks_night_pain
Field Definition	During the past 4 weeks, have you been troubled by <u>pain from your</u> <u>knee</u> in bed at night?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee that is going to be replaced.
METeOR Identifier	







Field Coding	0 = Every night
	1 = Most nights
	2 = Some nights
	3 = Only 1 or 2 nights
	4 = No nights
	9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Knee Score Work	
Field Name	q1_oxf_ ks_work
Field Definition	During the past 4 weeks, how much has <u>pain from your knee</u> interfered with your usual work (including housework)?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee that is going to be replaced.
METeOR Identifier	
Field Coding	0 = Totally 1 = Greatly 2 = Moderately 3 = A little bit 4 = Not at all 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Kr	nee Score Confidence
Field Name	q1_oxf_ ks_work
Field Definition	During the past 4 weeks, have you felt that your knee might suddenly "give way" or "let you down"?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee that is going to be replaced.
METeOR Identifier	
Field Coding	0 = All of the time 1 = Most of the time 2 = Often, not just at first 3 = Sometimes, or just at first 4 = Rarely/never 9 = Unknown/Not stated
Availability	







DF_00_Q1 Oxford Knee Score Shopping	
Field Name	q1_oxf_ ks_shopping
Field Definition	During the past 4 weeks, could you do the household shopping on your own?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee that is going to be replaced.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Knee Score Stairs	
Field Name	q1_oxf_ ks_stairs
Field Definition	During the past 4 weeks, could you walk down one flight of stairs?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee that is going to be replaced.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily 9 = Unknown/Not stated
Availability	

DF_00_Q1 Oxford Knee Score Total	
Field Name	q1_oxf_ ks_total
Field Definition	Summed total of the responses to the twelve Oxford Knee questions.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N







Maximum Size	1
Comments	Each of the Oxford Knee Score questions has five possible responses with 0-4 points attributed to each answer. Adding the relevant number of points for each response provided derives the total score. The maximum number of points is 48 (best outcome) and the minimum is 0 (worst outcome).
METeOR Identifier	
Field Coding	
Availability	







#### Section 4: Process Structure

- Q1 Date of Admission
- Q1 Date of Procedure
- Q1 Surgeon Last Name
- Q1 Surgeon Given Name
- Q1 Surgeon Middle Initial
- Q1 Anaesthetic Score
- Q1 Admission High Dependency Unit
- Q1 Planned Admission High Dependency Unit
- Q1 Complications During Admission
- Q1 Blood Transfusion
- **Q1 Transfusion Source**
- Q1 Units Transfused
- Q1 Date of Discharge
- Q1 Admitted Length of Stay
- Q1 Discharge Destination

DF_00_Q1 Date of Admission	
Field Name	q1_adm_date
Field Definition	Date on which a patient is admitted to hospital for an episode of care.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8
Comments	This may or may not be the same as the date of procedure.
METeOR Identifier	269967
Field Coding	
Availability	

DF_00_Q1 Date of Procedure	
Field Name	q1_proc_date
Field Definition	The date on which a procedure commenced during an inpatient episode of care.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8
Comments	Procedure commencement date.
METeOR Identifier	270298
Field Coding	
Availability	







DF_00_Q1 Surgeon Last Name	
Field Name	q1_surg_surname
Field Definition	That part of a name a person usually has in common with some other members of their family, as distinguished from their given name(s).
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Text String
Data Format	X[X(39)]
Maximum Size	40
Comments	
METeOR Identifier	286953
Field Coding	
Availability	

DF_00_Q1 Surgeon Given Name	
Field Name	q1_surg_given_name
Field Definition	The person's identifying name within the family group or by which the person is socially identified.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Text String
Data Format	[X(40)]
Maximum Size	40
Comments	
METeOR Identifier	287035
Field Coding	
Availability	

DF_00_Q1 Surgeon I	Middle Initial
Field Name	q1_surg_mid_initial
Field Definition	The person's middle or second name.
Justification	
Mandatory	Optional
Collection Method	
Data Type	Text
Data Format	X
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	
Availability	







DF_00_Q1 Anaesthe	tic Score
Field Name	q1_asa
Field Definition	The American Society of Anesthesiologists Score is a global score that assesses the physical status of persons before surgery.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	The ASA is a subjective global measure of health.
METeOR Identifier	
Field Coding	<ul> <li>1 = A normal healthy person</li> <li>2 = A person with mild systemic disease</li> <li>3 = A person with severe systemic disease</li> <li>4 = A person with severe systemic disease that is a constant threat to life</li> <li>5 = A moribund person who is not expected to survive</li> <li>9 = Unknown/Not stated</li> </ul>
Availability	

DF_00_Q1 Admission	n High Dependency Unit
Field Name	q1_adm_hdu
Field Definition	Was the patient admitted to a high dependency unit after their joint replacement surgery?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	A high dependency can include any of the following units: intensive care unit; high dependency unit; step up unit; intensive nursing unit.
METeOR Identifier	
Field Coding	1 = Yes 2 = No 9 = Unknown/Not stated
Availability	

DF_00_Q1 Planned Admission High Dependency Unit	
Field Name	q1_planned_adm_hdu
Field Definition	Was the admission a planned admission?
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number







Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes 2 = No 9 = Unknown/Not stated
Availability	

DF_00_Q1 Complication	tions During Admission
Field Name	q1_adm_compl
Field Definition	Which of the following complications occurred during the admitted episode for joint replacement?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N[N]
Maximum Size	2
Comments	
METeOR Identifier	
Field Coding  Availability	01 = None 02 = Delirium 03 = Surgical site infection requiring oral antibiotics 04 = Surgical site infection requiring IV antibiotics 05 = Surgical site infection requiring surgery no prosthesis removal 06 = Surgical site infection requiring surgery with removal partial/full prosthesis 07 = DVT 08 = PE 09 = Fat emboli 10 = Respiratory infection 11 = CVS (stroke, MI, arrhythmia) 12 = Dislocation 13 = Fracture 14 = Nerve injury 15 = Bladder infection 16 = Bladder retention 17 = Wound dehiscence 79 = Death 89 = Other 99 = Unknown/Not stated

DF_00_Q1 Blood Transfusion	
Field Name	q1_bld_transf
Field Definition	Was the patient transfused during their admitted episode of care for joint replacement?
Justification	
Mandatory	Mandatory







Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not stated
Availability	

DF_00_ Q1 Transfusion Source	
Field Name	q1_transf_source
Field Definition	What was the source of the blood used for transfusion.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Autologous blood donated preoperatively; autologous blood from reinfusion drain; and donor blood.
METeOR Identifier	
Field Coding	1 = autologous donation preoperatively 2 = autologous re-infused 3 = donor 9 = Unknown/Not stated
Availability	

DF_00_Q1 Units Trai	nsfused
Field Name	q1_units_transf
Field Definition	The total number of units of blood that a person has received, either whole blood or packed red cells.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N[NNN]
Maximum Size	4
Comments	Include autologous preoperative blood donation or perioperative reinfusion or donor blood transfusion. Do not include platelet transfusions or transfusion of fresh frozen plasma (FFP).
METeOR Identifier	
Field Coding	9999 = Unknown/Not stated
Availability	







DF_00_Q1 Date of Discharge	
Field Name	q1_dc_date
Field Definition	The date on which an admitted person completes the acute episode of care.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Date/Time
Data Format	DD/MM/YYYY
Maximum Size	8
Comments	For the purposes of this project, this is the date that the person has physically left or been discharged from the surgical or orthopaedic unit. Excludes statistical separation or type change.
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q1 Admitted	DF_00_Q1 Admitted Length of Stay	
Field Name	q1_adm_LOS	
Field Definition	The total length of stay measured in days.	
Justification		
Mandatory	Mandatory Automatic	
Collection Method		
Data Type	Number	
Data Format	N{N}	
Maximum Size	2	
Comments	Calculated as the date of discharge minus the date of admission. The calculation is inclusive of admission and discharge dates. Excludes statistical separation or type change.	
METeOR Identifier		
Field Coding		
Availability		

DF_00_Q1 Discharge	Destination
Field Name	q1_dc_dest
Field Definition	Accommodation to which a person is released on discharge from the surgical unit.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Usual residence or residence of relative/friend







2 = Inpatient rehabilitation same hospital
3 = Inpatient rehabilitation another hospital
4 = Hostel if not usual place of residence
5 = Nursing Home if not usual place of residence
6 = Another acute care hospital
7 = Death
8 = Other
9 = Unknown/Not Stated

Availability







#### **Section 5: Patient Experience and Engagement**

Q1 Expectation Pain

Q1 Expectation Function

Q2 Satisfaction

Q2 Success

Person Opts Out

DF_00_Q1 Expectati	on Pain
Field Name	q1_exp_pain
Field Definition	What are your expectations of your knee/hip pain 6 months after your surgery?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Severe pain 2 = Moderate pain 3 = Slight pain 4 = No pain 9 = Unknown/Not Stated
Availability	

DF_00_Q1 Expectation	on Function
Field Name	q1_exp_function
Field Definition	What are your expectations of your functional ability 6 months after your surgery?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Severe limitation 2 = Moderate limitation 3 = Slight limitation 4 = No limitation 9 = Unknown/Not Stated
Availability	







DF_00_Q2 Satisfacti	on
Field Name	q2_satisfaction_6mth
Field Definition	How would you describe the results of your surgery?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Poor 2 = Fair 3 = Good 4 = Very good 5 = Excellent 9 = Unknown/Not Stated
Availability	

DF_00_Q2 Success	
DI _00_QZ Success	
Field Name	q2_success_6mth
Field Definition	Overall, how are your hip problems now, compared to before your operation?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Much worse
	2 = A little worse
	3 = About the same
	4 = A little better
	5 = Much better
	9 = Unknown/Not Stated
Availability	

DF_00_Person Opts Out	
Field Name	opts_out
Field Definition	This is the date the person has advised they have elected to opt out of the registry. This includes both partial and complete opt out requests.
Justification	
Mandatory	Optional
Collection Method	
Data Type	Date/Time







Data Format	DDMMYYYY
Maximum Size	8
Comments	
METeOR Identifier	
Field Coding	
Availability	







#### Section 6: Outcomes

- Q2 Date Follow Up Commenced
- Q2 Follow Up Attempt
- Q2 Lost to Follow Up
- Q2 Date Follow Up Completed
- Q2 Readmission
- Q2 Readmission Reason
- **Q2** Readmission Hospital
- Q2 Reoperation
- **Q2** Reoperation Reason
- **Q2 Other Complications**
- Q2 Patient Death
- Q2 EQ5D Completion Date
- Q2 EQ5D Mobility
- Q2 EQ5D Personal Care
- Q2 EQ5D Usual Activities
- Q2 EQ5D Pain Discomfort
- Q2 EQ5D Anxiety Depression
- Q2 EQ5D VAS
- Q2 EQ5D Profile
- Q2 EQ5D Index
- **Q2 Oxford Completion Date**
- Q2 Oxford Hip Score Pain
- Q2 Oxford Hip Score Washing
- Q2 Oxford Hip Score Transport
- Q2 Oxford Hip Score Dressing
- Q2 Oxford Hip Score Shopping
- Q2 Oxford Hip Score Walking
- Q2 Oxford Hip Score Stairs
- Q2 Oxford Hip Score Standing
- Q2 Oxford Hip Score Limping
- Q2 Oxford Hip Score Sudden Pain
- Q2 Oxford Hip Score Work
- Q2 Oxford Hip Score Night Pain
- Q2 Oxford Hip Score Total
- Q2 Oxford Knee Score Pain
- Q2 Oxford Knee Score Washing
- Q2 Oxford Knee Score Transport
- Q2 Oxford Knee Score Walking
- Q2 Oxford Knee Score Standing
- Q2 Oxford Knee Score Limping
- Q2 Oxford Knee Score Kneeling
- Q2 Oxford Knee Score Night Pain
- Q2 Oxford Knee Score Work
- Q2 Oxford Knee Score Confidence
- Q2 Oxford Knee Score Shopping
- Q2 Oxford Knee Score Stairs
- Q2 Oxford Knee Score Total
- **EQ5D Index Change**







EQ5D VAS Change Oxford Score Change Comments

DF_00_Q2 Date Follow Up Commenced	
Field Name	q2_fup_commence
Field Definition	Date that the 6-month follow up was commenced.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8
Comments	What is today's date?
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q2 Follow Up	Attempt
Field Name	q2_fup_attempt
Field Definition	Select follow up attempt number.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = First attempt 2 = Second attempt 3 = Third attempt 4 = Fourth attempt 5 = Fifth attempt
Availability	

DF_00_Q2 Lost to follow Up	
Field Name	q2_fup_lost
Field Definition	Date at which it was determined that the person was lost to follow-up
Justification	
Mandatory	Optional
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8







Comments	Privilege to determine lost to follow-up assigned to administrator only.
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q2 Date Folio	w Up Completed
Field Name	q2_fup_complete
Field Definition	Date that the 6-month follow up was completed.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8
Comments	What is today's date?
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q2 Readmiss	ion
Field Name	q2_pt_readm
Field Definition	Indicates whether the person has been readmitted to any hospital for a problem attributed to their joint replacement surgery.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Ask the person if they have been readmitted to any hospital for any reason since they were discharged from their index joint replacement episode of care. If yes, clarify that the readmission was attributed to their joint replacement surgery 6-months earlier.
METeOR Identifier	
Field Coding	1 = Yes 2 = No 9 = Unknown/Not stated
Availability	

DF_00_Q2 Readmission Reason	
Field Name	q2_pt_readm_reason
Field Definition	The reason for the admission to any hospital since discharge from the index joint replacement episode of care.
Justification	
Mandatory	Conditional
Collection Method	







Data Type	Number
Data Format	NN
Maximum Size	2
Comments	
METeOR Identifier	
Field Coding	01 = Surgical site infection requiring oral antibiotics 02 = Surgical site infection requiring IV antibiotics 03 = Surgical site infection requiring surgery no prosthesis removal 04 = Surgical site infection requiring surgery with removal partial/full prosthesis 05 = DVT 06 = PE 07 = Dislocation 08 = Manipulation under anaesthesia 09 = Bladder infection or other bladder/bowel problems 10 = Fracture 89 = Other 99 = Unknown/Not stated
Availability	o Charles and Charles

DF_00_Q2 Readmiss	ion Hospital
Field Name	q2_readm_hosp
Field Definition	The hospital to which the person was readmitted.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = Same public hospital as surgery 2 = Different public hospital same health district 3 = Different public hospital other health district 4 = Same private hospital as surgery 5 = Other private hospital 9 = Unknown/Not stated
Availability	

DF_00_Q2 Reoperation	
Field Name	q2_pt_reoperation
Field Definition	Have you had another operation on your hip/knee since your joint replacement surgery 6-months ago?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1







Comments	Indicates whether the person has had another operation on the joint replaced six months ago.
METeOR Identifier	
Field Coding	1 = Yes
	2 = No
	9 = Unknown/Not stated
Availability	

DF_00_Q2 Reoperati	ion Reason
Field Name	q2_pt_reoper_reason
Field Definition	The reason for reoperation on the previously replaced joint.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	NN
Maximum Size	2
Comments	
METeOR Identifier	
Field Coding	01 = Surgical site infection requiring surgery no prosthesis removal 02 = Surgical site infection requiring surgery with removal partial/full prosthesis 03 = Dislocation 04 = Joint stiffness 05 = Peri-prosthetic fracture 06 = Implant fracture 07 = Bleeding 08 = Pain 89 = Other 99 = Unknown/Not stated
Availability	

DF_00_Q2 Other Con	nplications
Field Name	q2_pt_compl
Field Definition	Any other complications perceived by the person that did not require readmission or reoperation
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	N
Data Format	N[N]
Maximum Size	2
Comments	
METeOR Identifier	
Field Coding	1 = Yes 2 = No 9 = Unknown/Not stated
Availability	







DF_00_Q2 Patient Death	
Field Name	q2_pt_death
Field Definition	Indicates whether the patient has died since discharge from hospital for their joint replacement surgery.
Justification	
Mandatory	Optional
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8
Comments	This information is derived from linkage with national mortality data, or at 6-month telephone follow-up.
METeOR Identifier	
Field Coding	1 = Yes 2 = No 9 = Unknown/Not stated
Availability	

DF_00_EQ5D Q2 Completion Date	
Field Name	q2_eq5d_complete_date
Field Definition	Date that the 6-month follow up EQ 5D was completed
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8
Comments	What is today's date?
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q2 EQ5D Mobility	
Field Name	q2_eq5d_mobility
Field Definition	Rates the person's perceived mobility. Person indicates which of five statements best describes their mobility today.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = I have no problems with walking around







	2 = I have slight problems with walking around
	3 = I have moderate problems with walking around
	4 = I have severe problems with walking around
	5 = I am unable to walk around
	9 = Unknown/Not stated
Availability	

DF_00_Q2 EQ5D Personal Care	
Field Name	q2_eq5d_personal_care
Field Definition	Rates the person's perceived ability to perform their personal care activities. Person indicates which of five statements best describes their ability to care for themselves today.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = I have no problems with washing or dressing myself 2 = I have slight problems with washing or dressing myself 3 = I have moderate problems with washing or dressing myself 4 = I have severe problems with washing or dressing myself 5 = I am unable to wash or dress myself 9 = Unknown/Not stated
Availability	

DF_00_Q2 EQ5D Us	ual Activities
Field Name	q2_eq5d_usual_activities
Field Definition	Rates the person's perceived ability to perform their usual activities.  Person indicates which of five statements best describes their ability to perform their usual activities today.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Usual activities include work, study, house work, gardening, family time or other leisure activities.
METeOR Identifier	
Field Coding	<ul> <li>1 = I have no problems doing my usual activities</li> <li>2 = I have slight problems doing my usual activities</li> <li>3 = I have moderate problems doing my usual activities</li> <li>4 = I have severe problems doing my usual activities</li> <li>5 = I am unable to do my usual activities</li> <li>9 = Unknown/Not stated</li> </ul>
Availability	







DF_00_Q2 EQ5D Pair	n Discomfort
Field Name	q2_eq5d_discomfort
Field Definition	Rates the person's perceived pain or discomfort. Person indicates which of five statements best describes their pain or discomfort today.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = I have no pain or discomfort 2 = I have slight pain or discomfort 3 = I have moderate pain or discomfort 4 = I have severe pain or discomfort 5 = I have extreme pain or discomfort 9 = Unknown/Not stated
Availability	

DF_00_Q2 EQ5D An	xiety Depression
Field Name	q2_eq5d_anxiety
Field Definition	Rates the person's perceived level of anxiety or depression. Person indicates which of five statements best describes their anxiety/depression today.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	
METeOR Identifier	
Field Coding	1 = I am not anxious or depressed 2 = I am slightly anxious or depressed 3 = I am moderately anxious or depressed 4 = I am severely anxious or depressed 5 = I am extremely anxious or depressed 9 = Unknown/Not stated
Availability	

DF_00_Q2 EQ5D VAS	
Field Name	q2_eq5d_vas
Field Definition	Rates the person's perceived health on the day of completing the questionnaire. The person answers in response to the question: we would like to know how good or bad your health is TODAY; when 0 is worst health and 100 is best health what score would you give your health TODAY?







Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	[NNN]
Maximum Size	3
Comments	The VAS (Visual Analogue Scale) is rated from 0 – 100 with 0 being worst health today and 100 being best health today.
METeOR Identifier	
Field Coding	0 to 100 = person's self-rated health or well-being
	999 = Unknown/Not Stated
Availability	

DF_00_Q2 EQ5D Pro	file
Field Name	q2_eq5d_profile
Field Definition	EQ 5D profile lists the responses to the five questions as a five-digit number.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N(5)
Maximum Size	5
Comments	For example, 11111 means the person chose option 1 for each question; 43434 means the person chose option 4 for questions 1, 3, and 5, and option 3 for questions 2 and 4.
METeOR Identifier	
Field Coding	
Availability	

DE 00 O2 EOED Ind	AV.
DF_00_Q2 EQ5D Inde	
Field Name	q2_eq5d_index
Field Definition	EQ 5D index score on questionnaire two.
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	N.NNN
Maximum Size	5
Comments	The index score for the EQ 5D 5L is derived from the crosswalk value sets provided by EuroQol. A health state of 11111 is given an index score of 1.000. An index score of 55555 is given an index score of -0.594 for a United Kingdom population, and for a United States population -0.109. There is no index calculation for an Australian population at this time.
METeOR Identifier	
Field Coding	







#### Availability

DF_00_ Q2 Oxford Score Completion Date	
Field Name	q2_oxf_complete_date
Field Definition	Date that the 6-month follow up Oxford Score was completed
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Date/Time
Data Format	DDMMYYYY
Maximum Size	8
Comments	What is today's date?
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q2 Oxford H	p Score Pain
Field Name	q2_oxf_hs_pain
Field Definition	During the past 4 weeks, how would you describe the pain you usually have from your hip?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Severe 1 = Moderate 2 = Mild 3 = Very mild 4 = None 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Hip Score Washing	
Field Name	q2_oxf_hs_washing
Field Definition	During the past 4 weeks, have you had any trouble with washing and drying yourself all over because of your hip?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N







Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Impossible to do 1 = Extreme difficulty 2 = Moderate trouble 3 = Very little trouble 4 = No trouble at all 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Hip Score Transport	
Field Name	q2_oxf_hs_transport
Field Definition	During the past 4 weeks, have you had any trouble getting in and out of a car or using public transport because of your hip? (whichever you tend to use)
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Impossible to do 1 = Extreme difficulty 2 = Moderate trouble 3 = Very little trouble 4 = No trouble at all 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Hi	n Score Dressing
Field Name	q2_oxf_hs_dressing
Field Definition	During the past 4 weeks, have you been able to put on a pair of socks, stockings, or tights?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily







	9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford H	ip Score Shopping
Field Name	q2_oxf_hs_shopping
Field Definition	During the past 4 weeks, could you do the household shopping on your own?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Hi	p Score Walking
Field Name	q2_oxf_hs_walking
Field Definition	During the past 4 weeks, for how long have you been able to walk before pain from your hip becomes <b>severe</b> ? (with or without a stick)
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Not at all/severe on walking 1 = Around the house only 2 = 5 to 15 minutes 3 = 16 to 30 minutes 4 = No pain/more than 30 minutes 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Hip Score Stairs	
Field Name	q2_oxf_hs_stairs
Field Definition	During the past 4 weeks, have you been able to climb a flight of stairs?







Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Hi	p Score Standing
Field Name	q2_oxf_hs_standing
Field Definition	During the past 4 weeks, after a meal (seated at a table), how painful has it been for you to stand up from a chair because of your hip?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Unbearable 1 = Very painful 2 = Moderately painful 3 = Slightly painful 4 = Not at all painful 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford H	ip Score Limping
Field Name	q2_oxf_hs_limping
Field Definition	During the past 4 weeks, have you been limping when walking because of your hip?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	







Field Coding	0 = Rarely/never
	1 = Sometimes or just at first
	2 = Often, not just at first
	3 = Sometimes or just at first
	4 = Rarely/never
	9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford H	ip Score Sudden Pain
Field Name	q2_oxf_hs_sudden_pain
Field Definition	During the past 4 weeks, have you had any sudden, severe pain – "shooting", "stabbing", or "spasms" – from the affected hip?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Every day 1 = Most days 2 = Some days 3 = Only 1 or 2 days 4 = No days 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Hi	p Score Work
Field Name	q2_oxf_hs_work
Field Definition	During the past 4 weeks, how much has pain from your hip interfered with your usual work (including housework)?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Totally 1 = Greatly 2 = Moderately 3 = A little bit 4 = Not at all 9 = Unknown/Not stated
Availability	







DF_00_Q2 Oxford Hi	p Score Night Pain
Field Name	q2_oxf_hs_night_pain
Field Definition	During the past 4 weeks, have you been troubled by pain from your hip in bed at night?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the hip replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Every night 1 = Most nights 2 = Some nights 3 = Only 1 or 2 nights 4 = No nights 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Hi	p Score Total
Field Name	q2_oxf_hs_total
Field Definition	Summed total of the responses to the twelve Oxford Hip questions.
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Each of the Oxford Hip Score questions has five possible responses with 0-4 points attributed to each answer. Adding the relevant number of points for each response provided derives the total score. The maximum number of points is 48 (best outcome) and the minimum is 0 (worst outcome).
METeOR Identifier	
Field Coding	
Availability	

DF_00_Q2 Oxford Knee Score Pain	
Field Name	q2_oxf_ks_pain
Field Definition	During the past 4 weeks, how would you describe the pain you usually have from your knee?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N







Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Severe 1 = Moderate 2 = Mild 3 = Very mild 4 = None 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford K	nee Score Washing
Field Name	q2_oxf_ks_washing
Field Definition	During the past 4 weeks, have you had any trouble with washing and drying yourself all over because of your knee?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Impossible to do 1 = Extreme difficulty 2 = Moderate trouble 3 = Very little trouble 4 = No trouble at all 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Kr	nee Score Transport
Field Name	q2_oxf_ks_transport
Field Definition	During the past 4 weeks, have you had any trouble getting in and out of a car or using public transport because of your knee? (whichever you tend to use)
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Impossible to do 1 = Extreme difficulty 2 = Moderate trouble 3 = Very little trouble 4 = No trouble at all







	9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford K	(non Score Walking
Field Name	q2_oxf_ks_walking
Field Definition	During the past 4 weeks, for how long have you been able to walk before pain from your knee becomes <b>severe</b> ? (with or without a stick)
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Not at all/severe on walking 1 = Around the house only 2 = 5 to 15 minutes 3 = 16 to 30 minutes 4 = No pain/more than 30 minutes 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Ki	nee Score Standing
Field Name	q2_oxf_ks_standing
Field Definition	During the past 4 weeks, after a meal (seated at a table), how painful has it been for you to stand up from a chair because of your knee?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Unbearable 1 = Very painful 2 = Moderately painful 3 = Slightly painful 4 = Not at all painful 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Knee Score Limping	
Field Name	q2_oxf_ks_limping
Field Definition	During the past 4 weeks, have you been limping when walking
	because of your knee?







Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Rarely/never 1 = Sometimes or just at first 2 = Often, not just at first 3 = Sometimes or just at first 4 = Rarely/never 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Knee Score Kneeling	
Field Name	q2_oxf_ks_Kneeling
Field Definition	During the past 4 weeks, could you kneel down and get up again afterwards?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Knee Score Night Pain	
Field Name	q2_oxf_ks_night_pain
Field Definition	During the past 4 weeks, have you been troubled by <u>pain from your knee</u> in bed at night?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	







Field Coding	0 = Every night
	1 = Most nights
	2 = Some nights
	3 = Only 1 or 2 nights
	4 = No nights
	9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Knee Score Work	
Field Name	q2_oxf_ks_work
Field Definition	During the past 4 weeks, how much has pain from your knee interfered with your usual work (including housework)?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = Totally 1 = Greatly 2 = Moderately 3 = A little bit 4 = Not at all 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Kr	nee Score Confidence
Field Name	q2_oxf_ks_work
Field Definition	During the past 4 weeks, have you felt that your knee might suddenly "give way" or "let you down"?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = All of the time 1 = Most of the time 2 = Often, not just at first 3 = Sometimes, or just at first 4 = Rarely/never 9 = Unknown/Not stated
Availability	







DF_00_Q2 Oxford Kr	nee Score Shopping
Field Name	q2_oxf_ks_shopping
Field Definition	During the past 4 weeks, could you do the household shopping on your own?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Knee Score Stairs	
Field Name	q2_oxf_ks_stairs
Field Definition	During the past 4 weeks, could you walk down one flight of stairs?
Justification	
Mandatory	Mandatory
Collection Method	
Data Type	Number
Data Format	N
Maximum Size	1
Comments	Question relates to the knee replaced 6-months earlier.
METeOR Identifier	
Field Coding	0 = No, impossible 1 = With extreme difficulty 2 = With moderate difficulty 3 = With little difficulty 4 = Yes, easily 9 = Unknown/Not stated
Availability	

DF_00_Q2 Oxford Knee Score Total		
Field Name	q2_oxf_ks_total	
Field Definition	Summed total of the responses to the twelve Oxford Knee Scores.	
Justification		
Mandatory	Mandatory	
Collection Method		
Data Type	Number	
Data Format	N	







Maximum Size	1
Comments	Each of the Oxford Knee Score questions has five possible responses with 0-4 points attributed to each answer. Adding the relevant number of points for each response provided derives the total score. The maximum number of points is 48 (best outcome) and the minimum is 0 (worst outcome).
METeOR Identifier	
Field Coding	
Availability	

DF_00_EQ5D Index	Change
Field Name	eq5d_index_change
Field Definition	EQ 5D index score on questionnaire 2 (6 months) minus EQ 5D index score on questionnaire 1 (preadmission).
Justification	
Mandatory	Conditional
Collection Method	
Data Type	Number
Data Format	NNN
Maximum Size	3
Comments	The ability to calculate this score is dependent on the EQ 5D being completed at both preadmission and 6-month follow-up and the use of the crosswalk sets for the 5L questionnaire. A positive value denotes a perceived improvement and a negative value denotes perceived deterioration.
METeOR Identifier	
Field Coding	
Availability	

DF_00_EQ5D VAS Change		
Field Name	eq5d_vas_change	
Field Definition	EQ 5D VAS score on questionnaire 2 (6 months) minus EQ 5D VAS score on questionnaire 1 (preadmission).	
Justification		
Mandatory	Conditional	
Collection Method		
Data Type	Number	
Data Format	NNN	
Maximum Size	3	
Comments	The VAS (Visual Analogue Scale) is rated from 0 – 100 (0 being worst health today and 100 being best health today). A positive value in this data field denotes an improvement in perceived health related quality of life, and a negative value denotes perceived deterioration. The ability to calculate this score is dependent on the VAS being completed at both preadmission and 6-month follow-up.	
METeOR Identifier		
Field Coding		
Availability		







DF_00_Oxford Score Change		
Field Name	oxf_score_change	
Field Definition	Oxford Hip or Knee Score on questionnaire 2 (6 months) minus Oxford Hip or Knee Score on questionnaire 1 (preadmission).	
Justification		
Mandatory	Conditional	
Collection Method		
Data Type	Number	
Data Format	NN	
Maximum Size	2	
Comments	The ability to calculate this score is dependent on the appropriate Oxford Score being completed at both preadmission and 6-month follow-up.  A positive value denotes an improvement and a negative value denotes deterioration.	
METeOR Identifier		
Field Coding		
Availability		

DF_00_Comments	
Field Name	comment_6mth
Field Definition	Free text field for the person to make additional comments at 6-month follow up.
Justification	
Mandatory	Optional
Collection Method	
Data Type	Text
Data Format	X[X{199}]
Maximum Size	200
Comments	
METeOR Identifier	
Field Coding	
Availability	





